## Political Organization Notice of Section 527 Status

OMB No. 1545-1693

(July 2000)

Department of the Treasury Internal Revenue Service

1 Name of organization				
nearthy wisconsin the	Name of organization Healthy Wisconsin PAC		Employer identification number 39 1666867	
2 Mailing address (P.O. Box or number.	street, and room or suite	e number)		
5721 Odana Road				
City or town, state, and ZIP code				
Madison, WI 53719				
3 E-mail address of organization				
thartin@wha.org	<del></del>			
4a Name of custodian of records	46 CI	ustodian's address		
Alison K. Prange		5.721 Odana Road		
		Madison, WI 53719	)	
5a Name of contact person Tim Hartin	<b>5b</b> Co	ontact person's address 5721 Odana Road		
		Madison, WI 53719		
${\bf 6}$ . Business address of organization (if $c$ $N/A$	lifferent from mailing add	ress shown above). Number, street, a	and room or suite number	
City or town, state, and ZIP code N/A				
Part II Purpose				
7 Describe the purpose of the organiza	tion			
•••••				
•••••		ation, Inc.		
Part III List of All Related En 8a Name of related entity 1sconsin Health and	tities (see instruction 8b Relationship connected	ns)  8c Address  5721 Odana Road		
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Part III List of All Related English Name of related entity Isconsin Health and Rospital Association, Inc.	tities (see instruction 8b Relationship connected	ns)  8c Address  5721 Odana Road  Madison, WI 537		
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Part IV List of All Office 9a Name	9b Title	Compensated Employees (see instructions)  9c Address	
Alison K. Prange		5721 Odana Road	
	Treasurer	Madison, WI 53719	
		- Constant	
Under penalties of perju Reverue Code, and that it is true, correct, and cr	ry, I declare that the organization had I have examined this notice, includin implete.	med in Part I is to be treated as an organization discribed in section 527 of the Integrace grant and to the best of machine should be and be	
Sign		ENERAL Date Date	
Here	•	Form 8871 (7-2	